



WINTER 2003

McGill

MEDICINE

edition



*Centre for Research
on Language,
Mind and Brain*



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Winter 2003

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Photo: Nadine Saumure

*Dean of the Faculty of Medicine,
Abraham Fuks*

Dear Graduates and Friends,

I am very pleased to share with you the Faculty of Medicine newsletter for the winter session. It highlights a series of very important teaching and research projects that have engaged the members of our faculty over the past number of months. I am happy to report that our scientists will be moving into the Genomics and Proteomics Building before Christmas; this is the first of a series of construction projects that are destined to expand the research capacity for our Faculty. You will recall our previous newsletter defining the plans for the Bellini Life Sciences Building, an initiative that is currently in the detailed planning stage.

This newsletter highlights two exciting projects spearheaded by our colleagues in the allied health sciences. The first, in the School of Nursing, describes the newly developed research priorities for our School and its initiatives in undergraduate and post-graduate training. The second project emanates from our School of Communications Sciences and Disorders and is led by its Director, Professor Shari Baum. She and her colleagues have received a significant grant from the Canada Foundation for Innovation to develop the Centre for Research on Language, Mind and Brain (CRLMB), dedicated to an understanding of language and its disorders in development and disease. The unique feature of this outstanding Centre is that it brings together researchers in speech pathology, psychology, neurology, linguistics and communication science to better understand how humans acquire language and how the brain interprets the world around us.

We continue our series of articles highlighting the luminaries of the Faculty of Medicine by focusing on Professor Brenda Milner. It is quite appropriate that the same issue that describes the new CRLMB also describes Dr. Milner's remarkable contributions to neuropsychology and the understanding of human behaviour. Her work, carried out over more than half a century at the Montreal Neurological Institute, is one of the foci of research that has brought international recognition not only to Professor Milner, but indeed the entire University.

Our feature article on medical students highlights the Faculty's international make-up, which mirrors that of the University itself. Our Faculty of Medicine offers an outstanding environment in which to gain the skills and knowledge necessary to a career in medicine, and the multicultural environment of the city and the school represents an important backdrop against which social and cultural values are best shaped. Our international renown stems as much from our students and alumni as from the achievements of our outstanding faculty members. Our dependence on our administrative staff to achieve our objectives in teaching, research and clinical service is evident in the article on Merle Peden, whom many of you will remember. Finally, I am pleased to report that we had a wonderful homecoming season this past fall and were able to welcome back to the Faculty many alumni whose dedication and support help articulate our vision for the future.

With all good wishes for a happy and healthy holiday season.

Yours sincerely,

Abraham Fuks, BSc'68, MDCM'70
Dean, Faculty of Medicine

Bringing Research to the People

The most common images of nursing are either of selfless attendants to the sick, à la Florence Nightingale, or, in more recent times, the medical foot soldiers bearing the brunt of health care cutbacks. But while elements of truth may lurk in these representations, they are far from complete. And that's a concern for Dr. Susan French, BN'65, Associate Dean and Director of the School of Nursing. Her goals are twofold: to sell students on the idea of nursing as a career and to raise the level of activity in academic nursing at McGill.

"Montreal's anglophone nursing sector has the highest percentage of university-educated nurses in Canada: while the number of nurses with graduate degrees working in the service sector in the rest of Canada is between 1% and 3%, in Montreal the number hovers around 7%," says French. "This is wonderful – it will make it easier to create a world-class centre of academic nursing in Montreal. But we must not only have high-quality educational programs but also a solid research component," she stresses. "We need to include everything from the generation of knowledge to its utilization in practice." In order to meet this goal, the School of Nursing, with financial support from the Newton Foundation and through a series of collaborative workshops with members of the professional nursing community, has defined research clusters and is recruiting students into them – a development French calls "very exciting."

The clusters are a set of five research priorities: oncology nursing; pain/child and family nursing; nursing resource development; cardiovascular nursing; and nursing for the community and for special populations. Promising students will be encouraged to consider pursuing graduate work in these areas. The

School has also built solid relations with other institutions – both medical and academic – to ensure that students get the best education. For instance, students working in the "oncology" cluster have two faculty members to work with as well as practicing nurses specializing in oncology brought in to maintain a clinical component. "We have a wonderful commitment on

the part of the hospitals," says French. The program is not only interdisciplinary but also inter-institutional – at the doctoral level the School of Nursing developed a joint program with the Université de Montréal – a move that is critical to developing Montreal as a world-class centre, French emphasizes.

Academic nursing – especially involving graduate-level research – requires a solid foundation. "We emphasize top-notch programs, but they needn't be huge," French says. "The ingredients include good education, quality research, and quality practice, which are interdependent – one feeds into another." But while good graduate programs attract good graduate students, money also attracts them. As a result, French is working to get more bursaries and scholarships available for students at both the undergraduate and graduate levels. "Otherwise," she notes, "we just can't compete for the best students with the University of Toronto or McMaster, no matter how strong our programs."

Attracting students is important – but French also wants to attract them early in their career. "We don't have that many nurses going into doctoral programs under the age of 30 – most work professionally, and then after a number of years come back to do grad school," she says. "We're trying to get more young researchers by identifying them as undergraduates so they can envision research as a career possibility, and we can get them into graduate programs right away." Most students, she notes, come to nursing with the popular conception of what it involves, and these days, that can be a hard sell. "Every day the media is talking about working conditions and emergency wards closing down," she admits, "so we have to balance that by talking about what a fantastic career it is."

Of course, academic nursing is intimately concerned with the needs of the front-line practitioner. "The program aims to bring research into the clinic," French stresses. Recent research projects by faculty members have focused on such issues as the transfer of knowledge, exploring how and when patients and family learn best about disease. Another recent project studied 90 couples to determine how men and their partners cope with prostate cancer. These projects have important implications for the clinic, as they generate knowledge critical to the effective performance of nurses, and to the recovery and well-being of patients. And, says French, they will also go a long way toward bringing McGill, and Montreal, to the front lines of academic nursing.

Dr. Susan French, BN'65,
Associate Dean and
Director of the School
of Nursing



Photo: Owen Egan

Report on Admissions

International Students: Global McGill

Montreal is about as cosmopolitan as a city can be, a place where people from around the world converge. The Faculty of Medicine, which is no exception, makes a concerted attempt to lure the best and brightest students from abroad. “McGill is very proud of being an international university,” says Phil Beck, MDCM’64, DipPsych’69, Associate Dean of Admissions. Each year around a hundred international students apply for one of the 22 places reserved for them, out of a total of 149 new admissions. Within the last two years, 27 countries have been represented by these applicants.

“I had heard of McGill while doing my master’s in Paris. I was coming to North America partly for the style of education, where the hierarchy is much less pronounced than in the European system, but hadn’t really considered applying to Canadian schools,” says Vincent Ponette, MDCM’02, MBA’02, who was born in Belgium but lived in Paris and the U.S. But while attending a conference in Washington, he met a professor of physiology from Laval, who directed him toward McGill. “I came here for an interview on an extremely cold day. I thought, ‘My God, what am I doing here’ – but my interview was phenomenal.” Ponette came despite the weather.

Unlike Ponette, Karen Choong, MDCM’04, had a fairly clear idea about what McGill had to offer, as her brother is an alumnus. She came to Montreal through the International Medical University in her home of Kuala Lumpur, Malaysia. The IMU operates in a partnership with other universities, including McGill; midway through their second year, students transfer to a “partner” university. Says Choong, “I had thought of going to Ireland, but you get into clinical practice sooner here. It was a bit difficult for me because I entered midway, but it’s been a year now and I’ve met people.” And, unlike Ponette, she had already been informed what to expect from the weather.

Zina Kellow, MDCM’04, had first-hand, albeit remote, experience of Montreal. Kellow, who holds dual

Canadian and American citizenships, was born in Montreal while her father taught at McGill, but left at a very young age and was brought up in Kuwait.

“Growing up I had always heard of McGill,” she says, “and had always had an attachment to it.” McGill was the only Canadian school she applied to, along with 20

American universities, but it was also the first choice. “When I was accepted here I turned down all the American ones that offered places.”

Coming to a new city can be a bit disorienting, and several years ago a group of international students took measures to ease the transition for new students by producing a handbook, “The Out-of-town Student’s Guide to McGill University Faculty of Medicine,” filling in newcomers on everything from where to look for apartments to how to manage Canada Customs issues. In addition, international students are also involved in recruiting and welcoming people from abroad. Kellow, who has served as a “welcomer,” notes that the high level of student involvement in acclimatizing new international students was “very beneficial, and helped in things like where to do my banking.”

McGill, and Montreal, usually prove to be a hit with newcomers. “The diversity of people here is very interesting for me,” says Ponette, who successfully applied for residency only at McGill, so certain was he that he wanted to stay after taking his medical degree. “I enjoy the opportunity to work with both francophone and anglophone communities, as well as all the other communities the city has to offer.” Kellow agrees with his assessment. “Montreal is a fantastic city – the cultural diversity and European flair make it like no other in North America. If ever there comes a time when I have to leave it will be very hard for me.” As for the diversity in the medical program itself, she notes, “It creates a culture that you don’t see elsewhere. Even coming from a typical large American university where you think you would have diversity just by sheer numbers, there isn’t anything like it.” As Choong notes, though, “After a while you mix and mingle; basically, everyone is one class.”

The international flavour at McGill means connections around the world. “I see the MDCM designation on doors of doctor’s offices in many different countries, and you know it is a McGill graduate,” says Beck, who also came to McGill as an international medical student from New York. And, he notes, the university is committed to ensuring that more MDCM plaques are mounted on office doors across the globe, and that top students from abroad continue to add to the richness of the program at McGill.

Editor’s note: We are looking for success stories from our alumni practicing outside Canada and the United States. Let us know how your education at McGill helped you in practicing medicine. Please contact the editor at alumni.medicine@mcgill.ca

*Dr. Vincent Ponette,
MDCM’02, MBA’02,
Karen Choong, MDCM’04,
Zina Kellow, MDCM’04,
and Dr. Phil Beck,
MDCM’64, DipPsych’69*

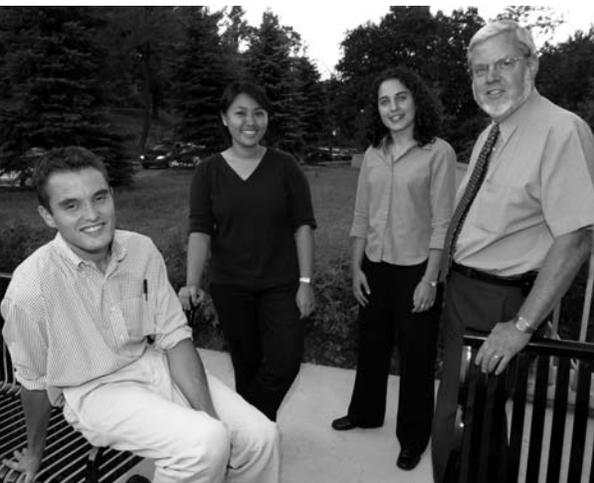


Photo: Owen Egan



*Delphine Tuot, MDCM'05,
Alexandre Dugas, MDCM'05, and
Adam Hofmann, MDCM'05*

The First-Year Experience

Few teen flicks glorify the good-time frolics of first-year medicine – there is too much studying involved. “We enjoy our parties,” admits Adam Hofmann, MDCM’05, but he nods in agreement as Delphine Tuot, MDCM’05, adds that “everyone is dedicated to meeting the work load.” Fortunately, the work, while a heavy load, is also stimulating. Says Alexandre Dugas, MDCM’05, “This is the first time I have studied for myself, thinking ‘I really need to know this stuff.’”

Hofmann, Tuot and Dugas are all in second year, and can reflect on the first-year experience with relative ease. Hofmann and Dugas, both from Montreal, took one year of pre-med studies after coming out of CEGEP, and are fast-tracking their way to their MD. Tuot, who comes from Dublin, Ohio, a suburb of Columbus, completed a BSc in biology in the United States before coming north. All seem to have survived, and thrived.

The highlights: “My favorite part was blood drawing in hematology,” says Tuot. “You grab a buddy from your class, and learn on each other. It was fun and practical – you’re in the hospital and you finally feel ‘Yeah, I’m doing medicine – that’s what I’m here for.’” Anatomy labs were also especially memorable. “I don’t know how to describe it – somebody is in front of you, and that person had a life. It’s a very spiritual thing.”

“I found anatomy daunting at first,” admits Tuot. “It was my first time actually seeing a cadaver, so it wasn’t easy. But then it became fascinating.” Of the cadavers, she says, “They become your teachers for the year, people who will stick with you, I think, for the remainder of your education.” Adds Hofmann, “Another high point of the year was the memorial service for the cadavers at the end of the year, which was very moving. Class members reflected and sang and showed their gratitude to the families.”

But if the anatomy class was a unique but fulfilling challenge, all agree that the hardest part of the shift to first-year medicine was the constant onslaught of examinations. “As an undergraduate, your semester is split into a midterm and a final,” says Hofmann.

“Going into a program where you have three weeks between exams is a shock. The first week you take off from studying, the second you take off and feel bad about it, and the third you actually study.” Laments Dugas, “You’re never really off...”

And on top of the continuous examinations, is the difference in studying styles, points out Tuot. “In undergrad you do an assignment and learn via the problems given to you. Here it’s much more you’re on your own, so you study without having that kind of framework.”

Fortunately, the material is “really interesting,” stresses Hofmann. “It solidified in my mind that I wanted to practice medicine – I’ve been absolutely captivated by everything I studied.” Each continues to look forward to what new studies will bring, as well as to the career that lies beyond. As Dugas notes, “When I was an undergraduate, I was looking forward to first year. Now we’re in second year, and I’m looking forward to going into the hospital in January.”

And after that? Says Dugas, “I think medicine is a way to make a difference in terms of helping people to have a better life.” Plus, adds Hofmann, “it’s a career where you’re continually challenged and continually learning, and I like working with people and seeing the scope of human experience.” Tuot agrees, stressing that medicine seems to her “one of the few professions in which you develop relationships with other individuals and can make a difference in their lives. In addition, it’s a fascinating journey for myself.”

So what advice do these hoary veterans of first-year medicine have for the next cadres of fresh young students? “Get involved with class life, don’t succumb to the pressure to spend all your time studying, have a social life, and keep in contact with your friends,” reels off Hofmann, as Dugas adds, “You can’t do first year if you don’t have a social life – you cannot study all the time.” And, on a practical note, Tuot says, “Try to diminish the stress level – I wish I had done more to explore the city last year. But this year I’m trying...”

MEDICAL SCHOOL APPLICATION DEADLINES FOR AUGUST 2003

JANUARY 15, 2003

For residents of Quebec applying to the four-year program

MARCH 1, 2003

For residents of Quebec applying to Med-P program.

Out of province applications are in early Fall of every year.

Web site: www.medicine.mcgill.ca/admissions



Photo: courtesy Montreal Neurological Institute

Centre for Research on Language

“Language grows out of life,” said Anne Sullivan, who found fame as the teacher of Helen Keller. She was making a rhetorical point rather than a scientific observation, but she was, all the same, on solid ground: language is, among other things, a social and a neurological phenomenon. As a result, says Shari Baum, “the only way we’ll advance our understanding of how language works is through a multidisciplinary perspective.” To facilitate this perspective, the university established the Centre for Research on Language, Mind and Brain in November 2001. “A number of us realized that there is a unique strength at McGill in language research from a variety of perspectives,” points out Baum, the Centre’s director. “But while some of us were collaborating, many of us weren’t really talking to one another even though we knew the others were there.”

The Centre, located temporarily in Beatty Hall, also the home of the Faculty of Medicine’s School of Communication Sciences and Disorders (also directed by Baum), will strive to integrate the university’s language researchers, including linguists, psychologists, neurologists, and specialists in communication disorders and education. To that end, it has established four axes of research: speech science modeling and analysis; the neural bases of language; language acquisition processes; and visual language processing. “The idea is that, within and across axes, people will collaborate and apply paradigms and theories from one area to another,” explains Baum. One of the Centre’s strengths lies in the breadth of research and the different populations studied. “We have many people looking at language acquisition, second-language acquisition, sign language acquisition, at different aspects such as phonological forms, syntax, lexical semantic development, developmental language disorders, language disorders associated with brain damaged and degenerative disease, with focal lesions through stroke or traumatic brain injury, Alzheimer’s, and aspects of language affected by memory loss,” Baum enumerates. Few other research centres have that range. One advantage, she notes, is that the centre’s broad multidisciplinary makeup will encourage researchers to take paradigms from one discipline and apply them to another. For instance, ideas from cognitive neuroscience can be imported into research on language development. Thus, says Baum, “we can look at the regions of the brain

activated when people process particular types of linguistic information and see, for instance, if it is the same in bilingual speakers. We can explore not only how language is acquired, but how the brain is organized to process it.”

The breadth of the Centre’s research mandate is reflected in its title. “Mind,” explains Baum, refers to mental representation – e.g., thinking, language processing – but not necessarily to the neural substrate for that representation. That’s the realm of “Brain.”

The neurological foundation of language is also the realm of cognitive neurologist Howard Chertkow, whose work explores the neural functioning of people with brain damage and language problems. “Cognitive neuroscience, by nature multidisciplinary, includes linguistics, communication disorders, neurology, brain imaging, and computer models,” says Chertkow, who is also the director of the Bloomfield Centre for Research in Aging, located at the Lady Davis Institute at the Jewish General Hospital. “The field is new, but has expanded exponentially in the past few years,” he says. Technical breakthroughs in brain imaging mean that researchers can acquire functional images through PET and functional MRI scans, and in effect can watch language taking place in people’s brains.

“... the mind signs in the same way it uses the structure of the brain.”

Clockwise from top right:

Dr. Shari Baum, Director of the Centre for Research on Language, Mind and Brain

Dr. Howard Chertkow

Dr. Rachel Mayberry, PhD’79



Photo: Owen Egan

, *Mind and Brain*

“Technology and computer advances have really driven the development of the area.”

New technology also means that researchers no longer have to wait for someone to have a stroke or to be on the operating table to see what parts of the brain control what types of activities. “We can apply transcranial magnetic stimulation (TMS) to healthy young people,” says Chertkow, who has been working with Dr. Tomas Paus, of the Montreal Neurological Institute, an innovator in this new field. “You give a gentle electronic massage to one area of the brain, and either impair or stimulate the function of that area for a couple of seconds. Thus, we can block an area and see if it affects people in particular ways.” Chertkow has undergone the process himself, saying he found it “fascinating.” And, he notes, “Penfield mapped out the motor homunculus in neurosurgery with the patient’s skull removed. Now we can do the same thing in the lab with TMS.”

In addition to mapping the sites of language in the brain, the centre will also be expanding the very notion of what constitutes language. Dr. Rachel Mayberry, PhD’79, former Director of the School of

Communication Sciences and Disorders, who has a background in psycholinguistics and communication disorders, studies sign language, language acquisition, and the role of gesture in communication.

“Philosophically, we think of language as what we speak and hear, and because of that, sign has often been thought of as the opposite of language or speech. Traditionally, many people have believed that allowing people with communication disorders to communicate in an alternative manner means that they’ll not learn language properly.” Mayberry’s work investigates the roles of the sensory, perceptual and motor systems to determine if the mind cares whether we acquire language by watching it, as with sign language, or by listening to it. “The answer is that the mind doesn’t care – it uses the structure of signs in the same way it uses the structure of words,” she says. However, there is a critical period for language acquisition, both with signed and spoken language – and that period comes when one is very young. Indeed, she points out, the fact that deaf children born to deaf parents start learning sign at the same rate, and go through the same stages of babbling and non-grammatical constructions as hearing children shows that early language acquisition is highly organized in ways that may be due to the rapid brain growth at this age.

“Research in sign language and gesture involves questions of the visual system, as well as motion and space detection – and what does the brain do in this process? These questions are interdisciplinary, and very appropriate for the centre,” Mayberry notes. The Centre also helps recruit students from around the world, she says. “It crystallizes the fact that we have so much expertise here at McGill – students know that if they come here for sign and gesture research, they know they will have all these other things they can explore. It really gives prominence to language work at McGill.”



Photo Owen Egan

*... uses the structure of
uses
of words...”*



Photo Owen Egan

The prominence is further enhanced by a Canada Foundation for Innovation grant of \$1.7 million to the new centre, which purchased critical equipment, such as a digital video recording studio for filming and analysis (“Language acquisition and gestural language researchers do a lot of taping,” says Baum). The grant also purchased event-related potential systems (“A kind of electrode cap,” she explains), which measure patterns of activity in the brain, and the transcranial magnetic stimulation systems employed in Chertkow’s research. The Centre also benefits from its close relation to the Montreal Neurological Institute, with its armory of PET and MRI machines, which enable researchers to watch brain activity as it is occurring.

The Centre is likely to have a significant impact beyond research. Baum would like to offer seminars on topics of interest to both the public and medical and therapeutic practitioners, and suggests that language education could be a critical activity for the centre. And health care benefits could also be profound. Mayberry suggests that a better understanding of gesture may also lead to greater knowledge of language, and that therapeutic decisions could be influenced not only by how a child speaks, but also by how he or she gestures. And Chertkow points out, “Something like TMS has the potential to be therapy as well as tool.” A doctoral student of his used TMS in Dr. Paus’ laboratory to block an area of the brain, and found that subjects were slower in naming pictures. With Alzheimer’s patients, it may be possible to stimulate the same area of the brain to improve its function. “The hope,” he concludes, “is that through centres like this, maybe we can bring the technology into the area of day-to-day treatment.”

McGill Luminary

“I’m a terribly nosy individual,” confesses Brenda Milner, PhD’52, DSc’91. “Curiosity drives me. When someone does something odd, I wonder if there is a reason, and if so, could I test it.” The trait has served her well. From her early work with Wilder Penfield through her years heading the neuropsychology unit (or indeed, being its sole member at the start) and into her recent collaborations, Milner has remained at the forefront of neuropsychology, especially in her research into memory and the hippocampus – a part of the brain for which she expresses a particular fondness.

Born in Manchester, Milner graduated from Cambridge in 1939 and spent the years of the Second World War carrying out research into radar tracking, to determine the most effective way to display information. She moved to Canada with her husband shortly after the war, when he received a one-year post in Montreal. Her love of the French language had prepared her well for the new city, and she began teaching psychology at the Université de Montréal. When Don Hebb arrived at McGill with the manuscript of his seminal work *The Organization of Behavior: A Neuropsychological Theory*, she embarked on graduate work with him. This relationship eventually led to her collaborations with Wilder Penfield at the Montreal Neurological Institute, and thence to her groundbreaking research, especially the case of HM. In 1953, HM had been operated upon by an American neurosurgeon, William Scoville, who removed the anterior hippocampus and neighbouring structures from the medial temporal lobes on both sides of the brain to relieve epileptic seizures. While his seizures definitely lessened, HM also lost his ability to retain information of anything happening after the operation. When Scoville consulted with Penfield, the latter suggested that Milner examine the patient.

“It’s not enough to say people lose their memory: we wanted to see if there was something preserved in this abysmal forgetfulness,” Milner says. She tested HM with

a range of activities, and discovered that he exhibited memory retention in a motor skills test: drawing a star while watching his hand through a mirror. “HM showed a lovely learning curve over three days,” says Milner. “But when he got to the end of his 30th trial, he had no idea he had done it before. I postulated

that this kind of skill could be acquired independently of the hippocampus,” says Milner. “It was incredibly exciting, and showed that there are lots of memory systems in the brain.” The paper that resulted was a catalyst for much subsequent memory research.

As a result of her tremendous influence and continuing important research, as evidenced by over 100 published papers, Milner has received numerous honours, most recently a 2002 Honorary Doctorate of Science from Columbia University. She was inducted into the Canadian Medical Hall of Fame in 1997, is a Fellow of the Royal Society of London and the Royal Society of Canada, and is an Officer of the Order of Canada and an Officier de l’Ordre national du Québec.

Her current work, in collaboration with Dr. Denise Klein, focuses on the neurological processes functioning in bilingualism. Using PET scans, they have acquired data demonstrating the similarity of the neural processing of first and second languages in people speaking English and French. They repeated the tests, with much the same results, on subjects who spoke Mandarin with English as a second language and are currently pursuing this research with functional magnetic resonance imaging.

This recent work has intriguing possibilities for medical applications. “When preparing to operate on people with brain tumours, you have a challenge. You want to take out as much of the tumour as possible, but you don’t want your patient coming out with a serious, abrupt loss of language. We know what areas of the brain are involved in language, and can use the same tests to map out areas with the patients to see how close the tumour is to some of the regions we’d rather have spared. This information can then be transferred directly into the operating room,” Milner explains. “Having been here 50 years, this development is quite exciting to me because it recalls the days when Dr. Penfield was mapping speech; now we’re doing our pre-surgical mapping.”

Thus her research continues along its trajectory: the study of the memory functions of the right temporal lobe, and particularly different aspects of spatial and visual memory, in patients undergoing surgery, and questions about bilingualism in normal subjects and the spin-offs to surgical applications. “The really big questions are not the ones that engage my curiosity,” says Milner, looking back over her career. “I take shorter goals, looking for things I can test in a limited way. I don’t have the big dream, not because I’m old, but because I’ve never had it. Instead, I’ve always focused on specific issues, the ones that I’ve encountered.” Her engagement with those issues, though, has altered the way we understand the brain and memory.



Faculty Updates

Kudos

- DR. MARGARET LOCK has been awarded a Molson Prize from Canada's Council for the Arts. The Molson prizes recognize the recipients' outstanding lifetime contribution to the cultural and intellectual life of Canada.
- DR. J. EARL WYNANDS, OC, MDCM'54, GradDipMedicine'58, was the first recipient of the Distinguished Service Award of the Society of Cardiovascular Anesthesiologists.
- DR. CHANTAL BERNARD (Pediatrics) was awarded the Mead Johnson Nutritional Award for Medical Excellence, awarded to a physician who has shown exceptional patient care, superior knowledge, valued teaching abilities and generous accessibility.
- DR. MOSTAFA ELHILALI, PhD'69 (Professor and Chairman, Division of Urology), was awarded the Order of Canada, the country's highest honour.
- DR. ROBERT KINCH (Obstetrics and Gynecology) was selected by the graduating Medical Class of 2002 as the recipient of the Annual Osler Teaching Award.
- DR. J. ENRIQUE SILVA (Medicine), chief of the Division of Endocrinology and Metabolism, was recently elected to a two-year term as President of the Canadian Society of Endocrinology and Metabolism.
- DR. DAVE WILLIAMS, BSc'76, MDCM'83, MSc'83, Canadian Space Agency astronaut, became the first Canadian astronaut to be awarded the NASA Outstanding Leadership Medal. The OLM is awarded for notably outstanding leadership that has had a pronounced effect upon the technical or administrative programs of NASA.

New Appointments:

- PROFESSOR MARTIN DAWES has been appointed as Chair of the Department of Family Medicine of the Faculty of Medicine and Chief of the Department of Family Medicine of the McGill University Health Centre.
- DR. SAUL FRENKIEL, BSc'67, MDCM'71, has been appointed as Chair of the Department of Otolaryngology.
- DR. JOEL PARIS, MDCM'64, DipPsych'72, has been reappointed as Chair, Department of Psychiatry.
- DR. HANS ZINGG, PhD'83, has been appointed as Chair of the Department of Pharmacology and Therapeutics.

Farewell and Welcome to:

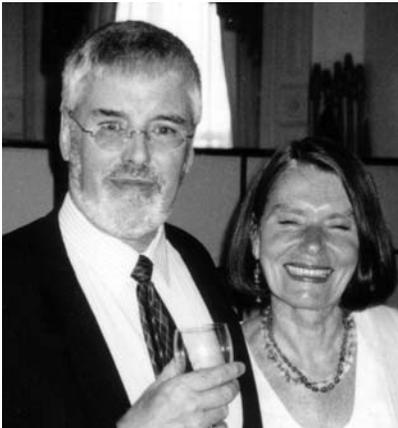
- DR. ANNE-MARIE MACLELLAN, BSc'72, MDCM'77, stepped down on June 30, 2002, after nine years as Associate Dean for Postgraduate Medical Education and Professional Affairs. DR. JEAN DESCHÈNES is Dr. MacLellan's successor.
- DAVID CRAWFORD retired as Head, Health Sciences and Osler Libraries after 30 years of loyal service. He is succeeded by JIM HENDERSON, who comes to McGill from the College of Physicians and Surgeons of British Columbia.



Photos: Nadine Saunier

Above: Dr. Mark Boyd, Former Director, Division of Gynecology, and Dr. Anne-Marie MacLellan, BSc'72, MDCM'77, Former Associate Dean, Postgraduate Medical Education and Professional Affairs

Right: David Crawford, Former Health Sciences Librarian, and Frances Groen, Director of Libraries



KEY DATES

FACULTY DEVELOPMENT KEY DATES

November 28, 2002
Reception to honour the 2001-2002 Teaching Scholars

December 12, 2002
Faculty Development Activity – Advanced Clinical Teaching Skills

June 12, 2003
Annual Symposium on Education in the Health Sciences

Please consult the Faculty Development web site at www.medicine.mcgill.ca/facdev/ for more information on these events.

FACULTY DATES TO REMEMBER

June 2, 2003 (TBC)
Medical Sciences Convocation

June 6, 2003
Commemorative service in gratitude to those who have given the gift of their bodies to health sciences studies at McGill.

Development and Alumni Relations



Photo: Dr. Neville Poy

Alumni and Friends of the University Reception at Dr. Neville Poy, BSc'58, MDCM'60, MSc'63, and Senator Vivienne Poy's, BA'62, home in Toronto on June 10, 2002.

DATES TO REMEMBER

December 31, 2002
Deadline to qualify for 2002 Tax Receipt. Donations dated on or before December 31, 2002, will receive a tax receipt for 2002.

I am pleased to report that we have had a successful and enjoyable start to 2002. In June, Dr. Neville Poy, BSc'58, MDCM'60, MSc'63, and Senator Vivienne Poy BA'62 graciously hosted a reception for McGill Alumni and Friends at their home in Toronto.

In August we launched the new and improved alumni corner website at www.medicine.mcgill.ca/alumnicorner. The new site offers greater accessibility and a user-friendly design. We have also incorporated password-protected access to Alumni Profiles and a discussion board to encourage interaction between alumni, faculty and students. There's a search feature that enables quick searches of the site for easy location of alumni information. We couldn't have made these improvements without the help of the website advisory committee: Garrett Bird MDCM'05, Scott Owen, BSc'01, MDCM'05, Donald Doell, MDCM'73, MSc'80, Jennifer Day, MedIT, BEng'87, Eng'91, CertProfGerman'94, Rachel Jacobson, BSc'03 and Amy Samsonovitch, the Faculty of Medicine Development and Alumni Relations Coordinator.

Already this year, the Faculty has benefited from the generosity of its graduates and friends. We are particularly grateful for three special gifts. The Richard L. Cruess Fund in Medical Education was established by Brent Norton MDCM'84. Dr. Norton wanted to honour Dr. Cruess, who was Dean of the Faculty from 1981-1995, for his support and encouragement during Dr. Norton's student years.

A special gift from Alan Edwards and the Louise Edwards Foundation will support the work of the McGill/MUHC Pain Centre. The Centre, a unique chronic pain research and care facility, has achieved wide recognition since its inception more than a decade ago.

The Marjorie and Gerald Bronfman Foundation and Corinne Bronfman established the Marjorie Bronfman Chair in Social Studies in Medicine, honouring a long-time friend of McGill and the Faculty of Medicine. The Chair will enable the Faculty to remain at the forefront of social studies in medicine.

Finally, the end of the calendar-year is fast approaching and we thank those graduates who have made their gifts to the McGill Alma Mater Fund. I would like to remind all who still wish to make a gift in 2002 to do so by December 31 in order to receive a tax receipt for this year. I know that you will want to help us achieve, and perhaps even surpass the Faculty's alumni giving goal of \$865,000.

On behalf of the staff of the Faculty of Medicine Development and Alumni Relations Office, we wish you all a healthy and safe holiday season and a happy and prosperous 2003.

Scot DeJong
Executive Director, Development

HOMECOMING 2002: CLASS LEADERS

Special thanks to the Class Leaders who made Homecoming 2002 such a great success. We also wish to thank the classes that have decided to commemorate their anniversary by raising funds to support the activities of the Faculty.

Class of 1942: Rita Shane

Class of 1947: Joseph Stratford

Class of 1952: Mimi Belmonte; committee members: Marv Clamen, Edwin Coffey, David Elkin, William B Hyndman, Carroll A. Laurin, Arthur J. Markus, I.W. Weintrub, Douglas G. Kinnear and Gord Irwin

Class of 1957: John Lough

Class of 1962: Michael Laplante, Alan Tenenhouse, Harry Glick, Rea Brown, Jim Sullivan

Class of 1967: Eli Einbinder, Lily Hechtman

Class of 1977: John Carsley, John Gordon

Class of 1982: Sandra Donnelly, Mary Anne Huggins

Class of 1987: Stacey Schwartz, Tracy Monk, Donna Goldenberg, Lajos Kovacs

Class of 1992: Sevan Ortaaslan, Harold Olney, Sophie Ligier



Merle Peden's Legacy: Helping Students

Hanging on the wall of Merle Peden's apartment is a 1992 reunion photograph of the Medicine Class of '57. While not a member of the class, she was a special contributor from 1953 to 1967 when she was the Faculty of Medicine secretary, the front-line person for two Deans, Duff and Stevenson: fielding questions, calming anxieties and generally making life run smoothly for students and professors.

"Students came to me for practically everything," she recalls. "I sat in an open office behind a wooden counter, and I would answer their questions. If I didn't know the answer, I would tell them to come back in an hour, and then I would find the information they were looking for." Her efforts did not go unnoticed. Says John Lough, BSc'55, MDCM'57, "We called her 'Miss Peden – the problem solver.'"

Peden's problem-solving skills helped her learn the ropes quickly. When she became secretary in 1953, Peden inherited the job from Gertrude Mudge. "Miss Mudge was a great person. She had run the place for almost a quarter of a century, and gave me a list of what had to be done," she chuckles, adding that "the students and I learned together. They asked me questions, we got along very well, and I tried not to let anybody down." Lough, who began his studies the same year Peden began her career at McGill, confirms the observation. "Merle is very well remembered by my classmates," he says.

For the hundred new students who arrived each year, Merle Peden was the public face of the Faculty. The office of that era included the Dean, his personal secretary and Peden, managing operations from their base in the Strathcona Building; by contrast, the Dean's Office today requires a veritable phalanx of people to keep it running. And, of course, it was an age before email, photocopiers and web sites, so the Faculty secretary had a much more personal relationship to the students. "I can still see her putting up exam marks," says Lough. "It was the most stressful part of being a student. Everybody would be concerned..." But despite the anxiety she caused by such administrative acts, Peden retained a place in the hearts of the students. Indeed, the 1962 yearbook, *The Speculum*, is dedicated to her.

Merle Peden had led a rich life before joining the Faculty of Medicine. Born in Montreal West on March 30, 1911, she graduated from McGill with a Bachelor in Commerce in 1932; by 1935, she was working for Canadian Industries Ltd., where she prospered. But in 1944, she responded to a St. John's Ambulance advertisement requesting drivers for the war effort, and in January

Merle Peden, BCom'32

1945 found herself sailing the Atlantic on the Athena, both escorting children who had been sent to Canada but wanted to return home, and preparing to assume her new job as an ambulance driver. When she arrived, the driver shortage had been remedied, but there were numerous other positions. After a short period in London, she followed the army overseas, first to Belgium, to assist with released prisoners of war, and then to a one-year station in Isenbohn, Germany, with the Red Cross – where, as the sole Canadian, she was dubbed "Miss Canada." She returned home in 1946, and after another brief stint at CIL she moved on to become the secretary for the Montreal Museum of Fine Arts, where she was working when she heard of the job opening in the Faculty of Medicine. The rest, at least from 1953 to 1967, is McGill history. After leaving McGill, she worked briefly setting up courses for physicians at the Montreal General Hospital. "But I thought it was time to relax and do some travelling and give my parents a helping hand," she says.

It isn't difficult to see how such a vital and caring person would have had an impact on students. "When we had our class reunion 15 years ago," recalls John Lough, "we were looking for things to do. I asked myself, 'Who did I know who made a real contribution?' – and I thought of Merle Peden." Lough and his classmates decided that they would create a class gift to be known as the Merle Peden Bursary, given to a student needing financial assistance to pursue a medical degree. Thirty-five years after her retirement, Merle Peden's name remains associated with the act of helping students.

The Gift of a Lifetime Bequests and other planned gifts for McGill University

**How does a planned gift work?
Is there any financial benefit to the donor who makes one?**

A planned gift is a charitable donation arranged during a donor's lifetime but not available to McGill until sometime in the future. The most common type of planned gift is a bequest, but it is just one of many types, as you will see in this folder.

A bequest to McGill University may serve to reduce, by means of a tax credit, the income tax payable by the donor's estate. A planned gift may eliminate or reduce tax on capital gains when appreciated property is given.

For More Information:
Susan Reid, Director, McGill Planned Gifts Office,
3605 de la Montagne, Montreal, Quebec, Canada H3G 2M1

susan.reid@mcgill.ca
tel.: (514) 398-8286 • fax: (514) 398-7362 • 1-800-567-5175
www.mcgill.ca/alumni
(click on "Supporting McGill"
then on "Planned Giving")



Homecoming 2002

Clockwise from top left photo:

Leacock Lunch with Scot DeJong, Executive Director of Development, BA'88, Phil Beck, MDCM'64, DipPsych'69, James Digby, BSc'48, MDCM'52, Charles Scriver, BA'51, MDCM'55, Eric Cadesky, MDCM'03, Linda Crelinsten, Gordon Crelinsten, BSc'68, MDCM'70, Jim Henderson, Health Sciences Librarian, Amy Samsonovitch, Development and Alumni Relations Coordinator.

Our Medical Alumni returned to their old stomping grounds at the McIntyre Medical Building and surrounding Montreal area to celebrate Homecoming 2002. For four jam-packed days and three party-filled evenings (September 26-29) they attended brunches, lunches and lectures, including the 25th anniversary class Medical Seminar (this year hosted by the class of 1977), chatted with classmates and old profs, and learned of the priorities and progress of the Faculty of Medicine in a talk delivered by Dean Abraham Fuks.



Photos: Owen Egan and Nadine Saumure

Rita Shane, MDCM'42, Dean Abraham Fuks

Medical Seminar hosted by the Class of 1977. John Gordon, MDCM'77, Dean Abraham Fuks, John Carsley, MDCM'77, MSc'85

Sarah Anderson with her mother Barbara Robertson, MDCM'77 and Dean Fuks. Dr. Robertson came in from Saudi Arabia to participate in the festivities.

Dean Fuks and Robert E. Mitchell, MDCM'47. Dr. Mitchell made a wonderful gift to the Faculty and the Osler Library by donating his copy of Synopsis Medicinae: or, a Compendium of the Theory and Practice of Physick written by William Salmon, Professor of Physick, which was printed in 1695.

Alan Boone, MDCM'62, Walter Hendelman, BSc'58, MDCM'62, Dean Fuks and Lawrence Hutchison, BSc'49, MDCM'53, DipIntMed'58

Preparing for Homecoming 2003

Now, onto next year: Homecoming 2003 will be held from October 16-19 and will highlight all the events that you have come to look forward to, including the Medical Seminar and the Dean's Reception, the Leacock Luncheon, the anniversary celebration dinners (James McGill-55th anniversary, Jubilee-50th anniversary, Governor's-40th & 25th anniversary reception), Gibby's luncheon and walking tours.

If you graduated in a year ending in 3 and 8 it is your turn to take part in the celebrations. All classes participating in Homecoming 2003 will be receiving a letter from their class leader within the coming months. We encourage you to check out our Alumni Corner web site at www.medicine.mcgill.ca/alumnicorner. Here you can access updates or plans for Homecoming 2003, connect with classmates and colleagues, and send in your very own personal profile. You can also use our "on line" community bulletin board to chat with classmates and learn more about Homecoming 2003.

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